emvironment	SPECIAL EVENT SER	VICE REQUEST FOR		
ASANITATION		REQUESTOR INFORMATI	APPROVED BY:	
Organization Name:	CD15		Council District #:	15
Requestor Name:	Fernando Navarrete		Telephone Number:	(424) 215-1159
Request Date.	03/09/20		Cell Phone Number:	(424) 215-1159
E-Mail Address:	fernando.navarrete@lacity.org		Fax Number:	
		EVENT INFORMATION		
Event Name:	East Wilmington Cor	nmunity Clean Up		
Event Date(s)/Time: (30 days advance notice required for guaranteed	Event Start Date:	Event End Date:	Event Start Time:	Event End Time:
service)	03/13/20	03/13/20	8:00 am	1:00 pm
Requested Package: (Select Only One)	A - Blue Bin Only (\$100.94) E - Non-Food (\$136.58)	B - Blue Bin Only (\$149.75)	C - Blue Bin Only (\$396.43)	D - Blue Bin Only (\$865.34)
	I - Food Event (\$172.11)	F - Non-Food (\$209.15)	G - Non-Food (\$586.50)	H - Non-Food (\$1,429.64)
		J - Food Event (\$268.36) h more than 5,000 attendees, a custom	K - Food Event (\$775.97)	L - Food Event (\$1,992.11)
Optional Roll-Off Service:		22 plus tip fees of \$52 per ton)		22 plus tip fees of \$52 per ton)
Optional Staffing Service	Yes	No		22 prus lip rees or \$52 per tori)
(Based on Package Price List)			Overally of Add IV-	
Additional Liners (\$1 ea.):	☐ Yes	X No	Quantity of Add Liners:	
Comments:	Please make sure	the doors are not blo	ocked.	
		BILLING INFORMATION		
Bill to:	Requesting Person/Organization/Sponsor/Vendor General City Purpose Fund (Auth. by:			
	☑ Council Office (Authorized by: _)		
Bureau of Street Services (BS	SS) Special Events Reference	Number (if applicable):		
Subsidy Eligibility:	☐ Does not Apply ☐ 50% Special Events Subsidy		☑ Community Clean-Up (Restrictions Apply)	
Organization Name	CD15		Telephone Number: (424) 215-1159	
Billing Address:	638 S. Beacon St., Suite 552		San Pedro	90731
Authorized Signature:	I request the above collection services from the Buedlu of Santalith and agree to pay for services as a		sted on the Special Events Package List:	Print Name nando Navarrete
	DELIVE	RY AND PICK-UP INFOR		Tidilad Havairete
Containers Drop Off Site:		LACH SS	Wilmington	Zip
	Street Address		City	90744 Zip
Roll-Off Bins Drop Off Site:	1999 N. Blinn Ave.		Wilmington	90744
Site Contact Person(s):		Baran	Site Contact Cell. Number:	(310) 722-1244
Drop Off/Pick Up Date/Time:	03/13/20	03/16/20	7:00 am	Pick Up Time 1:00 pm
Comments:	Please deliver 2 roll off bins.			
Signature upon Delivery:	I have received the containers and services as indi	cated above and agree to the conditions listed below:		
Daytime Delivery/Pickup's will be schedu Tip Fees for Roll-Off Services will be dete Fee will be assessed for any lost or dame		on-Fri). Containers delivered during daytim	ne hours need to be stored in a secure loc	ration.
		SANITATION USE ONLY		
No. of Blue Containers:		No of Roll Off Bins: Quote for Roll Off Bins does not include tip fees which will be assessed at the conclusion of the event		
30 Gallon		30 Yard	40 Yard	Other
				I - i setti
No. of Black Containers:		Weight Slip Date	Truck Number or Roll-Off	Tons Dumped
60 G	allon			
	Date Sent	Confirmation	Confirmation to Organizers	Confirmation to Council
Request Sent to Yard:	1	1		

Req. Sent to Special Events:

Comments: